	PATENT A	PPLICATIO Effecti	N FEE DE	RD	D 10630126 2-0170,576011								
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			10				RAT	Ē	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		BASIC	FEE	375.00	OR	BASIC FEE	750.00	
TOTAL CHARGEABLE CLAIMS) 0 minus 20=		* \$		X\$	9=		OR	X\$18=		
INDEPENDENT CLAIMS			升 minus 3 =		*		X4:	2=		OR	X84=	84	
MU	LTIPLE DEPEN	DENT CLAIM PR	RESENT				+14	0≖		OR	+280=		
* If the difference in column 1 is less than zero, enter "0" in column 2							TOT	AL		OR	TOTAL	934	
CLAIMS AS AMENDED - PART II							OTHER THAN						
		(Column 1)	(Column 2)			(Column 3)	SMALL		ENTITY	OR	SMALL	ENTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	RA ⁻	ΓE_	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	· 10	Minus	** 2	0	=	X\$	9=		OR	X\$18=		
AME	Independent	* 4	Minus	***	E CLAIM	=	X42	2=		OR	X84=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							0=		OR	+280=		
								TAL		OR	TOTAL ADDIT, FEE		
		(Column 1) (Column 2) (Column 3)						-					
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI PAID	IBER OUSLY	PRESENT EXTRA	RA	ſĘ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X\$	9≖		OR	X\$18=		
AME	Independent	ndependent		I CLAIM	=	X4:	2=		OR	X84=			
<u> </u>	28 29 4× 47						+14	0=		OR	+280=		
	2 2 1									OR	TOTAL ADDIT, FEE		
ADDIT. FEE ADDIT. FEE ADDIT. FEE ADDIT. FEE													
ENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST HBER OUSLY FOR	PRESENT EXTRA	RA	ΓE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT C	Total	*	Minus	**		=	X\$	9=		ОЯ	X\$18=		
	Independent	*	Minus	***	T CL AIR	=	X4:	2=		OR	X84=		
•	「これる」 アスにうじ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								ŀ			

*U.S. Government Printing Office: 2003 - 498-278/69151

+140=

TOTAL

OR

+280=

ز م تسب

OR ADDIT. FEE

Application or Docket Number

^{*} If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

^{**}If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

**If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "20."

***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.